PART B - FEE(S) TRANSMITTAL

* Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

NSTRUCTIONS: This ppropriate. All further ndicated unless correct naintenance fee notifica	correspondence includit ed below or directed oth	for transmitting the ISSU of the Patent, advance of the patent, advance of the transfer in Block 1, by (a	JE FEE and PUBLICATI rders and notification of n a) specifying a new corres	naintenance fees wi pondence address;	and/or (b) indi	the current of cating a separ	correspondence address as ate "FEE ADDRESS" for
46290 WILLIAMS, N 10333 RICHMO HOUSTON, TX	MORGAN & AMI OND, SUITE 1100 177042	/2009 ERSON A	Fec(pape have	s) Transmittal. This ers. Each additional eits own certificate of	certificate can paper, such as of mailing or tra ificate of Maili	not be used fo an assignmen ansmission.	domestic mailings of the rany other accompanying t or formal drawing, must hission deposited with the United class mail in an envelope above, or being facsimile te indicated below.
	00000087 122325 510.00 DA 300.00 DA	10661715	atty (ratu	Hu Tu	(Depositor's name) (Signature) (Oate)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DO	CKET NO.	CONFIRMATION NO.
10/661,715 09/12/2003 Michael Marcovici 2100.004400/BLUMENTHAL 8267 TITLE OF INVENTION: AUTHENTICATING ACCESS TO A WIRELESS LOCAL AREA NETWORK BASED ON SECURITY VALUE(S) SSOCIATED WITH A CELLULAR SYSTEM							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL	FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	08/03/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS	JBCLASS			
AJAYI, JOEL 2617			455-411000				
CFR 1.363). Change of corresp Address form PTO/SI "Fee Address" ind	ication (or "Fee Address 22 or more recent) attach	nge of Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Uni recordation as set fort (A) NAME OF ASSIG	less an assignee is ident h in 37 CFR 3.11. Comp GNEE Alcatel-L Murray H	ified below, no assigned oletion of this form is NO ucent USA Inc iill, NJ (US)	THE PATENT (print or type data will appear on the part a substitute for filing and (B) RESIDENCE: (CITY C.	atent. If an assigned assignment. and STATE OR CO	OUNTRY)		
a. The following fec(s) are submitted: (Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies			b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required eds), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
a. Applicant claim	tus (from status indicated as SMALL ENTITY statu	is. See 37 CFR 1.27.	b. Applicant is no long	<u> </u>			
IOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party interest as shown by the records of the United States Patent and Trademark Office.							
Authorized Signature Typed or printed nam		Giebler Giebler	<u>. </u>	Date	7-2	9-09	
his collection of inform	nation is required by 37 C	FR 1.311. The information	on is required to obtain or r	ctain a benefit by th	e public which	is to file (and	by the USPTO to process)

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with pplicable fee(s), to: Mail Mail Stop ISSUE L. Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885 INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) papers. Each additional paper, such as an assignment or formal drawing, must evos e o dua have its own certificate of mailing or transmission. 46290 7590 05/01/2009 Certificate of Mailing or Transmission hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. WILLIAMS, MORGAN & AMERSON 10333 RICHMOND, SUITE 1100 HOUSTON, TX 77042 (Depositor's name (Signature (Date FIRST NAMED INVENTOR CONFIRMATION NO. APPLICATION NO. FILING DATE ATTORNEY DOCKET NO. 09/12/2003 Michael Marcovici 2100.004400/BLUMENTHAL 10/661,715 TITLE OF INVENTION: AUTHENTICATING ACCESS TO A WIRELESS LOCAL AREA NETWORK BASED ON SECURITY VALUE(S) ASSOCIATED WITH A CELLULAR SYSTEM PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE APPLN. TYPE SMALL ENTITY ISSUE FEE DUE NO \$1510 \$300 \$1810 08/03/2009 nonprovisional **EXAMINER ART UNIT** CLASS-SUBCLASS AJAYI, JOEL 2617 455-411000 1. Change of correspondence address or indication of "Fee Address" (37 For printing on the patent front page, list CFR 1.363). (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence or agents OR, alternatively, Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forthin 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. Alcatel-Lucent USA Inc. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Murray Hill, NJ (US) Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🗖 Corporation or other private group entity 🚨 Government 4b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fee(s) are submitted: Issue Fee A check is enclosed. Payment by credit card. Form PTO-2038 is attached. Publication Fee (No small entity discount permitted) eels), any deficiency, or credit any Advance Order - # of Copies The Director is hereby authorized to charge the required overpayment, to Deposit Account Number (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ■ b. Applicant is no longer claiming SMALL ENTITY status. Sec 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature Typed or printed name Registration No.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.